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APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/898,480	07/05/2001	Tomas Andreason	1410-762	8452
23117 7590 06/17/2008 NIXON & VANDERHYE, PC EXAMINER				
901 NORTH GLEBE ROAD, 11TH FLOOR ARLINGTON, VA 22203			AMINZAY, SHAIMA Q	
ARLINGTON,	VA 22205		ART UNIT PAPER NUMBER	
			2618	
			MAIL DATE	DELIVERY MODE
			06/17/2008	PAPER

Please find below and/or attached an Office communication concerning this application or proceeding.

The time period for reply, if any, is set in the attached communication.

Interview Summary	09/898,480 ANDRE		ASON, TOMAS	
interview Summary	Examiner	Art Unit		
	SHAIMA Q. AMINZAY	2618		
All participants (applicant, applicant's representative, PTO	personnel):			
(1) <u>SHAIMA Q. AMINZAY (Examiner)</u> .	(3)			
(2) John R. Lastova (Applicant Representative).	(4)			
Date of Interview: <u>11 June 2008</u> .				
Type: a)⊠ Telephonic b)⊡ Video Conference c)⊡ Personal [copy given to: 1)⊡ applicant	2)∏ applicant's representative	e]		
Exhibit shown or demonstration conducted: d) Yes If Yes, brief description:	e) No.			
Claim(s) discussed: <u>1,7 and 21</u> .				
Identification of prior art discussed: <u>Henon</u> .				
Agreement with respect to the claims f) was reached. □	g)⊠ was not reached. h)⊡ N	N/A.		
of the claims, in particular the applicant representative poing phone. The Examiner will consider the discussed issues of the Examiner will consider the Examiner will be attached allowable is available, a summary thereof must be attached. The Formal Written Reply to the Example of	when an official response is filed the difference of the amendments that we do not be	ed. preed would rend would render the SUBSTANCE ( been filed, APP Y DAYS FROM T WHICHEVER IS	er the claims claims OF THE LICANT IS THIS LATER, TO	
	(Change O. Ansirana)			
Francisco Nata Variance Line (1) Community (1)	/Shama Q. Aminzay/			
Examiner Note: You must sign this form unless it is an Attachment to a signed Office action	Examiner's signature, if requi	irea		

Application No.

Applicant(s)